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PAGE 1/1 \* RCVD AT 5/25/2005 9:40:42 AM [Eastern Daylight Time] \* SVR: USPTO-EFXRF-1/0 \* DNIS:8729306 \* CSID: \* DURATION (mm-ss):00-46

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| POWER OF ATTORNEY<br>and<br>CORRESPONDENCE ADDRESS<br>INDICATION FORM | Application Number                      | 10/825,285   |
|   | Filing Date                             | 04/16/2004   |
|   | First Named Inventor                    | WU, Tsun-Zong  |
|   | Title                                   | Umbrella Handle Adapted                                  |
|   | Art Unit                                | 3737   |
|   | Examiner Name                           |  |

|  | Attorney Docket Number |                     | FP10171     |           |              |  |  |
|--|------------------------|---------------------|-------------|-----------|--------------|--|--|
| I hereby revoke all previous powers of attorney given in the above-identified application.   |                        |                     |             |           |              |  |  |
| I hereby appoint:  | 0000529                |                     |             |           |              |  |  |
| Practitioner(s) named below:   |                        |                     |             |           |              |  |  |
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| I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTQ/SB/98)   |                        |                     |             |           |              |  |  |
| SIGNATURE of Applicant or Assignee of Record   |                        |                     |             |           |              |  |  |
| Signature / 5 Land for any   |                        |                     |             | Date      | May 19, 2005 |  |  |
| Name WU, Tsun-Zong   |                        |                     |             | Telephone |              |  |  |
| Title and Company  |                        |                     |             |           |              |  |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.              |                        |                     |             |           |              |  |  |

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